

ATTITUDES OF EMPLOYERS TOWARD PEOPLE WITH
DISABILITIES: A COMPARISON OF BERLIN,
GERMANY, AND MILWAUKEE,
WISCONSIN, USA

by

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A Research Paper

Submitted in Partial Fulfillment of the
Requirements for the
Master of Science Vocational Rehabilitation Degree
With a Major in

Rehabilitation Counseling

Approved: 2 Semester Credits

Investigation Advisor

The Graduate College
University of Wisconsin-Stout
December, 2001

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ABSTRACT

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Attitudes of Employers Toward People with Disabilities: A Comparison of Berlin,
Germany, and Milwaukee, Wisconsin, USA.
(Title)

<u>Vocational Rehabilitation</u>	<u>Dr. Robert Peters</u>	<u>December/2001</u>	<u>44</u>
(Graduate Major)	(Research Advisor)	(Month/Year)	(No. of Pages)

The Publications Manual of the American Psychological Association (APA)
(Name of Style Manual Used in this Study)

Historically, people with disabilities have endured poor treatment and, more recently, high rates of unemployment. One of the main goals of professionals in the field of vocational rehabilitation is successful job placement. However, negative attitudes of employers have been identified as major barriers to successful job placement, and it has become critical that employers' attitudes are understood and addressed.

The purpose of this study was to investigate employer attitudes toward individuals with disabilities in both Berlin, Germany, and Milwaukee, Wisconsin, United States. This study attempted to answer the following questions:

1. What are employers' attitudes toward people with disabilities?
2. What are the differences in attitudes of American and German employers?

3. What differences in attitudes, if any, can be seen between female and male employers in the United States and Germany?

The subjects for this study were chosen using a systematic sampling method from two lists obtained from the Chamber of Commerce from each of the respective cities. One hundred subjects were selected from each list of employers. Information including age, gender, and national origin will be requested from each participant and a consent form will be included with each survey. A revised edition of the Scale of Attitudes Toward Disabled Persons was used for the Milwaukee subjects and a version translated into German was used for the subjects in Berlin, Germany. The revisions in the survey were made to include person-friendly language, putting the person before the disability.

The surveys were mailed to the Milwaukee subjects and handed out to the Berlin subjects to ensure a greater response rate. Each survey included a pre-addressed, postage-paid envelope for returning the survey. A response rate of 29 percent was achieved from the Berlin participants and 31 percent from the Milwaukee participants.

Results from the study indicated that the aggregate attitude of employers surveyed was favorable toward people with disabilities. Male participants from the United States displayed the most favorable attitude, and males from Germany displayed the least favorable attitude toward people with disabilities. Age did not appear to have an impact on the reported attitude of the participants from Germany. However, the data collected from the participants from the United States showed that as age decreased, many of the resultant scores of the revised SADP increased. This showed that among the employers surveyed in the United States, those in the younger age groups showed a more favorable attitude toward people with disabilities.

Acknowledgements

I would like to express my sincere gratitude to Dr. Robert Peters for his guidance and patience with this thesis. His insight and expertise is something I am very grateful for.

I would also like to thank Bill Blanchard and Max, as well as John and Sandy Lefebber for their understanding and support while I took on this project. The cards and letters of support as well as the encouragement to keep going made all the difference. Finally, I would like to thank Kristi Lefebber for her constant encouragement while I collected data in Germany. Without everyone's support, it would have been very difficult to complete and submit this Plan B thesis.

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Chapter I

Introduction

Historically, unemployment rates for individuals with disabilities have been high around the world. In recent years, however, several countries have passed legislation in hopes of reducing barriers of employment for individuals with disabilities.

One of the main goals of the Americans With Disabilities Act (ADA), passed in the United States in 1990, as well as a goal of the Rehabilitation Act of 1973, was “to ensure equal access to employment for people with disabilities” (Daly, 1997, p. 101). Germany has passed similar legislation, and under the Severely Disabled Persons Act of 1974, employers are provided incentives regarding employment of individuals with disabilities and a quota system was created stating both public and private firms with 16 or more employees are required to reserve 6 percent of their positions for individuals with disabilities (Russell, 1996). According to Dutton (2000), however, a July 2000 study by Cornell University showed that “one of the biggest barriers to employing disabled job candidates is the negative attitude of supervisors and coworkers” (p. 44). While the ADA (United States) and the Severely Disabled Persons Act of 1974 (Germany) can build access and decrease disability-related barriers, it cannot mandate employers to hire or keep employees with disabilities.

There has been a great deal of criticism by the business sector regarding the recent legislation on employment rights for people with disabilities. Some of the criticisms include an unfair financial burden to businesses in both the United States and Germany as well as the vagueness and ambiguity of the ADA in the United States (Moore & Crimando, 1995). It is difficult to regulate Title I of the ADA and it is even

possible to reject the German laws regarding employment of individuals with disabilities by paying a fee. According to the United States Department of Labor only 47 percent of the top industries in the Midwest/ West found the ADA to have a positive impact on their business (2001). Moore and Crimando conclude that the success of the ADA and other employment legislation are highly contingent on the actions and attitudes of employers (1995).

Daly (1997) states that there is an underlying belief to the goal of the ADA that “all individuals, regardless of their impairments, have a desire and a right to work in the labor market” (p. 101). For this reason, the United States and Germany, among many other countries, have passed legislation in order to help individuals with disabilities attain and maintain work in the community. Both the United States and Germany have disability policies that include direct intervention in the labor market on behalf of workers with disabilities. Germany is an appropriate choice for comparison with the United States because “it combines a generous and accessible social insurance system with employment support, rehabilitation, and retraining for those with disabilities, and a quota system that requires public and private employers to hire 1 worker with a disability for every 16 workers it employs” (Daly, 1997, p. 102). Daly also confirms that Germany and the United States have a similar prevalence of disability in their populations.

Unemployment rates for people with disabilities are notably higher than that of people without disabilities. Of the approximately 15.6 million working-age adults with disabilities in the United States, only 34.6 percent were employed as compared to the 79.8 percent employment rate of those without disabilities (U.S. Census Bureau: State and County QuickFacts, 2001).

One of the main goals of professionals in the field of vocational rehabilitation is successful job placement, and because negative attitudes of employers are often identified as major barriers to successful job placement, it is imperative that employers' attitudes are understood and addressed (Gilbride, 2000). Gilbride also concludes that "negative attitudes are kept in place by myths regarding people with disabilities as workers, by ineffective rehabilitation placement models, and by employer hiring procedures designed solely to avoid making any risky hires" (p. 18). However, if rehabilitation professionals have more complete data about employer attitudes, this concern can be addressed.

Statement of the Problem

The purpose of this study was to investigate employers' attitudes towards individuals with disabilities in both Milwaukee, Wisconsin and Berlin, Germany. In the study, questionnaires were mailed to 100 employers in Milwaukee, Wisconsin and handed out to 100 employers in Berlin, Germany. The subjects were systematically chosen from lists of employers provided by the Chambers of Commerce for the respective cities. The surveys were returned by mail. The study took place in August of 2001 in Berlin, Germany and Milwaukee, Wisconsin.

Research Questions

This study will attempt to answer the following questions:

1. What are employers' attitudes toward people with disabilities?

2. What are the differences in attitudes of American and German employers?
3. What differences in attitudes, if any, can be seen between female and male employers in the United States and Germany?

As this study attempts to determine attitudes of employers toward people with disabilities, the term disability is not specifically defined and is left for the employer to interpret. This was done to allow the employers to express their attitudes and beliefs about individuals with any type of disability within an entire spectrum of disabilities.

The use of non-specific terms in the survey may be considered a limitation of the study because it may turn some employers away from completing the survey. Response rate of the survey may be another limitation of this study.

Literature Review

Historical Treatment of People with Disabilities

People with disabilities have endured different types of negative treatment throughout the ages. According to Marks (1999), the ancient Greeks and Romans practiced infanticide on deformed and sickly children. People with disabilities were subjected to superstitious ideas leading to persecution in the Middle Ages. A disability was considered to be the result of divine judgment and punishment for sin and sometimes believed to be associated with witchcraft and evil. Marks (1999) states that during Victorian times and until as late as the 1950's, proposals were developed and enacted to sterilize people with disabilities in order to avoid degeneration of the human species.

Often times, people with disabilities were seen as objects of aversion and pity. Many were ostracized and reduced to dependency and begging. Some were sold into slavery and others were forced to live their lives in isolation (Thayer and Rice, 1990).

As early as the 16th century, people with disabilities began to benefit from formal religious charities. In the late 1500's, St. Vincent DePaul established workshops for people with disabilities where they were given work to "enliven their spirits and ameliorate their physical condition" (Thayer and Rice, 1990, p. 34). Religious sentiments as well as personal salvation were the main motivational factors in helping individuals with disabilities. Much of the care provided to people with disabilities during this time was based on the idea that it was needed to "protect the interests of society" (Thayer and Rice, 1990, p. 34).

In 1601, England passed the Poor Relief Act addressing the "lame, impotent, old, blind, and such other among them being poor and not able to work" (Thayer and Rice,

1990, p. 34). This occurred during a time when disease and disability were often approached in terms of poverty. This law not only influenced American laws, but it was American law for the first 150 years of the colonies' existence (Groce, 1992).

By the late 1700's, a few schools and institutions for children and adults with specific types of disabilities were appearing in Europe. Kanner (1967) explains that the mid-1800's brought private and the first government-sponsored German center for the care of children with disabilities. Schools and institutions were established for the blind, deafmutes, and the mental defectives. It was not until later that the first school for people with physical disabilities was established in Germany; prior to this, people with physical disabilities were kept at home and excluded from the community. By 1866, an attempt to add vocational training at a German institution for people with disabilities had to be given up because of the difficulty in finding skilled staff (Kanner, 1967). It became apparent during this time period in Germany that people with disabilities "whose lives would traditionally have been quite limited, could do more" (Groce, 1992, p. 8).

The trend of providing schooling and services to people with disabilities spread to the United States, but not immediately. Although the people of the United States shared a common history, culture, and academic traditions with people in Europe, the transfer of information and knowledge was most likely slowed by the Revolution and the economic and social upheaval (Groce, 1992). Many prominent European leaders sent their own students to the United States to initiate programs similar to those established in Germany and other European nations. Gradually, schools, institutions, and associations for and by deaf and blind individuals as well as individuals with cognitive disabilities were

established due, in part, to the interchange of ideas from Europe and a redefinition of social welfare and education in the United States (Groce, 1992).

The programs in the United States were geared more toward educating people with disabilities and preparing them to enter life in the community more efficiently. Many of the institutions in the United States offered industrial training (Adams, 1971). According to Adams (1971), people with disabilities in the United States

benefited from the Jeffersonian theory that universal education was an inherent feature of a democracy, and also from the less well articulated idea that in a new country dependent on flexibility and innovation for success the youth must be equipped to maintain themselves adequately, both for personal reasons and for their contribution to national productivity (p. 24).

The interchange of ideas and knowledge from abroad continued to be significant in the 19th century and into the early 20th century. By 1917, the number of institutions and schools in Germany had nearly tripled since the trend began (Kanner, 1967). The first sign of public concern and the use of state funding for services for people with disabilities was seen in the United States during that same time (Adams, 1971). Progress continued in organizational, medical, and legal approaches to disability-related issues in the United States as well as Europe in the early 1900's. According to Groce (1992), "World War I might be considered a watershed for the field of rehabilitation, as massive casualties forced refinements of surgical and post-surgical care" in the United States and Europe (p. 13). Although survival rates increased for the servicemen due to advances in medical care, a comprehensive approach for those who suffered severe injuries was still lacking.

The United States passed the Soldier Rehabilitation Act in 1918 which started the first national rehabilitation program in the country (Thayer and Rice, 1990). During this time the United States federal government was becoming more involved in disability-related issues. Another specific concern was the increasing number of individuals being injured on the job and needing rehabilitative services. As early as 1893, the United States president, Benjamin Harrison urged Congress to pass a workers' compensation program similar to the one already established in Germany in 1883 (Groce, 1992). By 1920, 42 of the states in the United States had passed laws in which workers injured on the job would be compensated for lost income (Groce, 1992). This opened the opportunity for related issues to be brought to Congress and in 1920 the Vocational Rehabilitation Act was passed, calling for vocational rehabilitation services including assessment, training, support, and placement services to be provided to those injured on the job (McCarthy, 1988).

Although the treatment of people with disabilities looked as though it was improving, the concept of eugenics appeared. In Germany, disability as a status brought extermination rather than rehabilitation (Hershenson, 2000). According to Adams (1971), this time period brought a shift in attention "from the aim of protecting the mentally handicapped from the ravages of a cruel and exploitative society to protecting society from the feared contamination of inferior mental stock and its perpetuation in increasingly large numbers" (p. 30). This phase was known as the eugenic scare. The eugenics-inspired activities in Germany were the product of Adolf Hitler and the Third Reich while the United States was involved in forced sterilization programs for people with disabilities (Gillon, 1998).

The euthanasia movement in Germany under Adolf Hitler began in the 1930's. Hitler informed the physicians in Germany that Aktion T-4 would be enacted and this "breakthrough campaign" held that "medical attention and money should go, on a cost-benefit analysis, to those who could be brought back to full productive health, while the chronically disabled would be removed from society" (Gallagher, 1995, p. 402). Most of the people murdered were neither terminally ill, in unbearable pain, or anxious to die; they consisted of individuals with severe disabilities and chronic mental illness (Gallagher, 1995). Hitler attempted to rationalize his program by stating that due to the war, health resources were limited and it would be more cost-effective to keep able-bodied individuals healthy (Gallagher, 1995). Some people with disabilities in Germany faced mandatory sterilization or medical or psychological experimentation.

Hitler halted the official program in the middle of 1941 due to a rising wave of protests from religious leaders as well as people with disabilities themselves and their friends and families. The mass murders continued, however, with many physicians as well as SS officers acting on their own counsel (Gallagher, 1995). Reports indicate that individuals with chronic mental illness were simply shot while the practice of needless murder of people with disabilities in the concentration camps and hospitals continued even after the end of World War II (Gallagher, 1995). According to Gallagher (1995), it is estimated that more than 200,000 German citizens were murdered during the euthanasia movement.

Although the idea of eugenics are often associated with forced sterilization, experimentation, and mass murders in Nazi Germany, the United States took part in a similar, however less extensive, movement. According to Marks (1999), the first forced

sterilization of “feeble-minded” people was carried out in the United States in the early 1900’s. A rising interest in eugenics led to laws in 25 states mandating sterilization of the criminally insane and hereditarily unfit (Marks, 1999). This movement continued throughout World War II and into the 1950’s; by the late 1950’s, more than 60,000 United States citizens were forced to be sterilized (Marks, 1999).

These acts of euthanasia and forced sterilization are indicative of the attitudes of many of the citizens of the United States and Germany held during this time. Marks (1999) explains that “the disablism inherent in eugenic policies was not the product of a minority of racists and extremists, but has become an implicit part of popular Western cultural assumptions” (p. 35). These assumptions help to explain some of the extreme infringements carried out against people with disabilities in the 1900’s. Adams (1971) states that “the eugenic scare, however shortlived and ineffectual in its social measures, was more significant for the attitudes it embodied” toward people with disabilities as well as the underlying social philosophy (p. 32).

Overview of Legislation Regarding People with Disabilities

In the decades to come, the United States and Germany followed a similar timeline in passing legislation regarding the rights and services offered to people with disabilities. This began by defining the term “disability.” The German government relies heavily on strict definitions to determine eligibility of funding and services. Disability is defined in Germany as “a permanent functional impairment resulting from an irregular physical, mental, or psychological condition” (Russell, 1996, chap. 1). People with a disability are required to register their impairment with public officials in

order to receive benefits and services. Individuals with a medically certified degree of disability of 50 percent or more, or those who have been defined by Germany's Employment Service as having a functional disability of more than 30 percent are eligible for services (Russell, 1996). Not unlike in the United States, many German people with a disability are refusing to be categorized as having a disability due to the negative stereotypes and attitudes often attached. Without the categorization of having a disability, an individual in Germany will not fall under employment quotas and does not have access to the services provided to people with disabilities.

In the United States, disability is defined as "a physical or mental impairment that substantially limits one or more of the major life activities of such individual, a record of such an impairment, or being regarded as having such an impairment" (Tuch, 1999, p. 275). Under the regulations in the United States, major life activities include caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working (Tuch, 1999). An individual must make the disability known in order to receive disability benefits and services and to be covered under the Americans with Disabilities Act.

As part of the European Union, Germany took part in the European Union Employment Community Initiative in order to target and provide services for groups that have specific difficulties in finding employment (Russell, 1996). All member states of the Union are involved and each state is required to articulate its own priorities and develop programs that meet the economic, social, national, and regional needs of that country.

The German government has made progress in changing these problematic areas. In 1953, the first law in Germany after World War II specifying an employment obligation for people with disabilities was passed (Russell, 1996). Further legislation, the Severely Disabled Persons Act, was enacted in 1974, securing the integration of people with disabilities into the workforce by providing protection against dismissal from employment (Russell, 1996). After Germany's reunification, an amendment was made to the German Constitution asserting "that no person shall be discriminated against because of race, gender, religious and political beliefs or disability" (Russell, 1996, chap. 4)

The Severely Disabled Persons Act also mandated that all private and public firms employ at least 1 worker with a disability for every 16 employees, or approximately 6 percent of their workforce (Daly, 1997). If an employer fails to meet this quota, a fine of DM200 per month is charged for every unfilled quota position. These fees are collected by the Bundesministerium für Arbeit und Sozialordnung, or the Federal Ministry of Employment and Social Affairs, and are used for subsidies in sheltered workshops, residential homes, assistive equipment needed to adapt the workplace, and special programs for people with disabilities (Russell, 1996). The money collected is also used for individual and regional subsidies. Since the fine is small and only equal to approximately \$150, many firms chose to simply pay the fine. According to Daly (1997), only 19 percent of German enterprises filled their quotas in 1990.

Another measure covered under the Severely Disabled Persons Act of 1974 was protection of people with disabilities from dismissal at a job. In order for a firm to dismiss an employee with a disability, it must first get advance approval from the Hauptförsorgestellen, the local unemployment office (Daly, 1997). The responses to requests of

dismissal are based on a set of criteria including the current economic standing of the company, internal work organizations, and reasons for requested disciplinary actions unrelated to the individual's disability (Russell, 1996). This measure is beneficial to those who acquire a disability while employed as well as those with congenital disabilities. This measure does, however, discourage some employers from initially hiring a person with a disability because a great deal of requests for dismissal are turned down from the government. Russell (1996) reported that more than 50 percent of the applications requesting dismissal were refused in 1990.

The Severely Disabled Persons Act provided incentives for employers to hire people with disabilities. If a firm hires a person with a disability, wage subsidies are available from the government for the first three years that person is employed. The wage subsidies cover 100 percent in the first six months and gradually decrease to 60 percent by the third year (Russell, 1996). Many employers in Germany are unaware of this incentive while others complain of unnecessary paperwork involved with the incentive. Employers can also receive monetary assistance from the Hauptfürsorgestellen for adaptation of the workplace, special employment programs, and reimbursement for extraordinary expenditures on the part of the employer (Russell, 1996).

"Trustworthy Persons" is a program in Germany set up through the Act of 1974, in which firms employing five or more individuals with disabilities elect a Trustworthy Person to be in charge of stimulating further hiring of people with disabilities, providing assistance and advice to coworkers with disabilities, encouraging the appropriate assignment of employment for people with disabilities, advising the company on how to

avoid redundancy among workers and disabilities, and finally, ensuring a healthy and secure work environment with reduced risks of injury (Russell, 1996). The individuals chosen for these positions are often people who have a disability themselves.

Much like in the United States, Germany provides sheltered workshops for individuals who are not able to find suitable work in the community. The majority of individuals working in the sheltered workshops have cognitive disabilities, but people with chronic mental illness, physical disabilities, and visual and hearing impairments also work in these settings (Russell, 1996). The workshops provide industrial training and work, arts and crafts, social and medical services, skills training, and assessment of skills. Sheltered workshops in Germany are run by private entities, but must follow the guidelines set up in the Severely Disabled Persons Act. Unfortunately, wages often do not allow workers to meet their needs and legal rights for employees do not apply in sheltered workshops (Russell, 1996). Both the United States and Germany use supported employment as an alternative to sheltered workshops. The use of job coaches is provided when additional support is needed.

Under Germany's Vocational Rehabilitation Act of 1974, vocational assistance must include all forms of assistance "necessary to sustain, enhance, generate, or restore the capacity of the individual to eventually earn his own income through employment" (Russell, 1996, p. 4). The German government has very specific guidelines for achieving this, which are covered in the Handicraft Regulation Act. According Russell (1996), the Handicraft Regulation Act states, "vocational training for people with disabilities must take place in an officially recognized traineeship within an enterprise or administration and alongside people without disabilities" (p. 4). Training must also be supplemented by

participation in a vocational training school. If this type of training is not possible due to the severity or nature of the disability, the German government provides special training centers for vocational training, as required by the Vocational Rehabilitation Act (Russell, 1996). The government established separate training centers in order to retrain adults who have acquired a disability, and it is in these centers that job placement services are offered (Russell, 1996).

Michailakis (1997) reports that the German laws and policies regarding people with disabilities emphasize prevention, individual rehabilitation, accessibility measures, individual support, and anti-discrimination. Under these laws, many benefits are guaranteed to people with disabilities. These include health and medical care, training, rehabilitation and counseling, financial security, assistance towards employment, independent living, and participation in decisions which affect the individual (Michailakis, 1997). Although laws and policies exist protecting people with disabilities in Germany, Michailakis (1997) explains that attitudinal factors as well as financial problems remain barriers in these areas.

A number of pieces of legislation in the United States have attempted to address similar concerns regarding people with disabilities. In 1935, the Social Security Act was passed as well as the first permanent approval for a vocational rehabilitation program. Following this, came the Vocational Rehabilitation Act of 1954, a major milestone in securing the rights of people with disabilities. Thayer and Rice (1990) explain that the Vocational Rehabilitation Act of 1954 included financing improvements, an establishment of research and demonstration project funding, funding for counselor education, as well as construction of rehabilitation facilities. By 1965, numerous

revisions were made to the Vocational Rehabilitation Act to include an expansion of services to rehabilitation clientele and the establishment of the National Commission on Architectural Barriers to Rehabilitation of the Handicapped (Thayer and Rice, 1990).

By 1973, an extensive rewrite of the Vocational Rehabilitation Act was necessary. The newly named “Rehabilitation Act” accentuated priority to serve individuals with severe disabilities and required an Individualized Written Rehabilitation Program for every client served (Thayer and Rice, 1990). The Rehabilitation Act also instituted protection for certain civil rights of people with disabilities. Sections 503 and 504 of the Rehabilitation Act required that programs or activities receiving federal funds not discriminate in their employment practices against qualified people with disabilities exclusively by reason of disability, but did not require this of programs not receiving federal funds (Satcher and Hendren, 1992). It was not until 1990 that this same regulation applied to discrimination in both private and public employment (Miller, 1999).

The Americans with Disabilities Act (ADA) was passed in 1990, barring discrimination against people with disabilities in the private sector in employment, telecommunications, transportation, and public services and accommodations (Satcher and Hendren, 1992). This piece of legislation was enacted due to a number of findings by Congress regarding people with disabilities. In 1990, Congress found that, “some 43,000,000 Americans have one or more physical or mental disabilities, and this number is increasing as the population as a whole is growing older” (The U.S. Equal Employer Opportunity Commission [EEOC], 1997, p.1). Congress also found that “historically, society has tended to isolate and segregate individuals with disabilities, and, despite some

improvements, such forms of discrimination against individuals with disabilities continue to be a serious and pervasive social problem” (EEOC, 1997, p.1). Among other findings, Congress agreed that

the continuing existence of unfair and unnecessary discrimination and prejudice denies people with disabilities the opportunity to compete on an equal basis and to pursue those opportunities for which our free society is justifiably famous, and costs the United States billions of dollars in unnecessary expenses resulting from dependency and nonproductivity (EEOC, 1997, p. 2).

These were among the many reasons Congress enacted the Americans with Disabilities Act in 1990.

The ADA was the first legislation of its kind in the United States, attempting to remove discrimination and obstacles people with disabilities may face in many different areas. Miller (1999) explains that the ADA strives to eliminate barriers, both physical and attitudinal, which hamper people with disabilities from fully taking part in all realms of community life. Christopher Bell, a blind attorney who assisted in the writing of the ADA, established that “the ADA is the United States’ most ambitious attempt at social engineering” (as cited in Dutton, 2000, p. 40).

Title I of the ADA, which is the title most relevant to this study, deals with employment rights of people with disabilities. The EEOC (1997) states that it is illegal to discriminate against people with disabilities in employment recruiting, firing, hiring, training, job assignments, promotions, pay, benefits, lay-offs, leave, and all other employment practices. The employee or applicant must be able to accomplish the essential functions of the job with or without a reasonable accommodation and without

causing the covered entity, or employer, undue hardship. According to the EEOC (1997), a reasonable accommodation can include job restructuring, modification of the work schedule, reassignment to a vacant position, acquisition of equipment or devices, appropriate adjustment or modifications of examinations, training materials or policies, the provision of qualified readers or interpreters, as well as other comparable accommodations. The term undue hardship includes any action that requires significant difficulty or expense on the part of the employer (EEOC, 1997). This law applies to employers with 15 or more employees. Although the ADA guarantees many rights to people with disabilities who are qualified to do a job, it does not guarantee the right to a job.

Although Title I of the ADA is most relevant to this study, the remaining titles become important in that they help increase the chances of employment for many individuals with disabilities. Title II of the ADA covers public services such as accessibility to public transportation within a city as well as intercity means of travel and transportation facilities (U.S. Department of Labor, 2000). Title III covers public accommodations in all businesses, service providers, and commercial facilities, and Title IV addresses telecommunication relay services, which are mandated to run 24 hours a day (U.S. Department of Labor, 2000). Title V of the ADA explains insurance issues related to disability, prohibits state immunity, sets regulations, and notes the amendments made to the Rehabilitation Act of 1973 (U.S. Department of Labor, 2000).

The ADA has made great improvements for the rights of people with disabilities. Miller (1999) explains that the underlying idea of the ADA attempts to battle the fears, myths, and biases that the American public often associate with people with disabilities.

Since the passage of the ADA there has been a significant increase in accessibility to public facilities, but the unemployment rate for people with disabilities has not seen dramatic changes (Dutton, 2000). One reason for this may be that while the ADA can enforce and dictate the removal of physical barriers, it is much more difficult to enforce or remove attitudinal barriers.

Demographics of the Problem

The United States and Germany have both been actively working toward equality in employment for people with disabilities. According to Daly (1997), the United States and Germany have a similar prevalence of disability. People with disabilities remain the group with the highest unemployment rate and make up the largest percentage of people of any group in society living at or below the poverty level (Miller, 1999). This has remained unchanged even since the passage of many important pieces of legislation in both countries attempting to remedy this situation.

In 2001, the midyear population for the country of Germany was 83,029,536 with 51,604,712 people between the ages of 20 and 64, the majority of the working age group (U.S. Census Bureau: International Data Base, 2001). The United States population for 2000 was 281,421,906 with 174,200,159 between the ages of 18 and 65, or the majority of the working age (U.S. Census Bureau: State and County QuickFacts, 2001). Within the United States, the state of Wisconsin had a population of 5,363,675 in the year 2000, with 3,293,296 people between the ages of 18 and 65 (U.S. Census Bureau: State and County QuickFacts, 2001).

High unemployment rates for people with disabilities has been a long-standing problem in the United States and in Germany. According to the U.S. Census Bureau: Americans with Disabilities (1993), less than 14 percent of the workforce in the United States in 1991-92 consisted of people with disabilities. The unemployment rate for people with disabilities in the United States is typically around 70 percent (Dutton, 2000). Velasco (1998) states that the unemployment rate in some European Union countries can reach up to 80 percent for people with disabilities. According to the U.S. Bureau of Labor Statistics (2001), the average annual unemployment rate for the year 2000 was 3.5 percent in the state of Wisconsin and 3.8 percent in the Milwaukee area. The average annual unemployment rate for Germany in the year 2000 was 10.7 percent (Federal Statistical Office-Germany, 2001) and approximately 16 percent unemployment in Berlin ("Finding a Job in Berlin", 2001). Harris and Associates (as cited in Satcher & Hendren, 1991) discovered that 66 percent of the people with disabilities that they questioned showed a desire to work, implying that self-selection out of the workforce is not the only explanation for these high unemployment rates.

Attitudinal Barriers to Community Employment for People with Disabilities

"In the United States...work is paramount" (Vash, 2001, p. 42). This powerful statement says a lot about what the people of the United States value. According to Vash (2001), we feel our worth is dependent on the work we do. For those who do not or can not work, in a society where work is valued so highly, self-worth can become a major issue. People with disabilities often face this difficult situation, and for this reason, among many others, attitudinal barriers to employment must be addressed.

Although there has been an attempt to remove many of the physical barriers in the United States and Germany preventing people with disabilities from participating in work and other activities, the attitudinal barriers still exist and are more difficult to remove. Krajewski and Flaherty (2000) explain that nothing is more fundamental to the success of community involvement with people with disabilities than the acceptance and support of the general public. When the ADA was enacted, a wave of optimism spread claiming the new legislation would finally remove the barriers that prevented people with disabilities from complete integration into the traditional way of American life (Moore & Crimando, 1995). This, however, has not been the outcome.

A study by Cornell University (as cited in Dutton, 2000) illustrates that one of the most prominent barriers to employment for people with disabilities is the negative attitudes supervisors and coworkers hold regarding this population. These attitudes can lead to discriminatory practices, hampering an individual's chance to become a fully functioning member of the community (Anthony, 1972). Vash (2001) states that "attitudes drive our behavior" and in order to learn more about discriminating behavior, we must first look at attitudes of those who may be discriminating (p. 38). In order to address concerns regarding successful job placement in the community, understanding employers' attitudes toward people with disabilities is imperative (Gilbride, 2000). Vocational rehabilitation professionals can use this information to design an intervention strategy to remove some of the attitudinal barriers.

The perceptions and attitudes held by employers toward people with disabilities continue to be problematic in Germany as well. Much like in the United States, many employers in Germany are not fully aware of the policies regarding people with

disabilities. A lack of accurate information regarding people with disabilities is also a concern, allowing discriminatory practices to persist (Russell, 1996). Another concern in Germany revolves around the dismissal procedure for people with disabilities.

Employers may be more cautious in hiring an individual with a disability knowing they may have to seek permission from the government to dismiss that person (Russell, 1996).

These attitudes must be better understood in order to address the problems they create.

Chapter III

Methodology

The subjects for this study have been chosen using a systematic sampling

method from two lists. One hundred subjects were selected from a list of employers in Milwaukee provided by the Milwaukee Chamber of Commerce and one hundred subjects were selected from a list of employers in Berlin provided by the Berlin Chamber of Commerce.

A revised version of the Scale of Attitudes Toward disabled Persons (SADP) was used. The revisions in the survey were made to include person-friendly language,

naming

the person before the disability. The instrument is a 24-item questionnaire using a summated rating scale. Each subject was asked to respond to each statement using a six-point scale, ranging from -3, signifying “I disagree very much,” through +3, signifying “I agree very much.” There is no neutral response. Directions for taking the survey were printed at the top of the first page, as well as a rating key.

The Scale of Attitudes Toward Disabled Persons (SADP) was developed and tested by R. F. Antonak in 1981. The reliability and validity of the SADP may no longer be accurate since the questionnaire attempts to measure attitudes, a variable that has the potential to change over time. In 1981, the reliability coefficients of the SADP ranged from +.81 to +.85. The validity was tested by analyzing the relationship between the scores of the SADP and other attitude scales with the conclusion that the SADP is considered valid.

Each questionnaire included a page collecting demographic information including variables such as age, gender, and country of residence. The voluntary and confidential nature of the survey was explained with each questionnaire. One hundred surveys were mailed to the Milwaukee subjects and 100 were handed out to the Berlin subjects to

ensure a greater response rate. Each survey included a self-addressed, postage-paid envelope for returning the survey.

The response rate was a concern for this study, as it only reached 22 percent for the Berlin participants and 30 percent for the Milwaukee participants. A language difference between the two groups of subjects created a limitation. Questionnaires were translated from English to German in order to accommodate this limitation. The German versions were pilot tested with a German language teacher, a German editor, and a German special education teacher. After the pilot testing, a number of vocabulary and grammatical changes were made before the questionnaire was used.

Due to the low response rate, it is questionable how well the results will generalize to employers in Milwaukee and Berlin, or on a larger scale, to employers in the United States and Germany. However, to the extent that the characteristics are similar, these results should be applicable.

Chapter IV

Results

A revised version of the Scale of Attitudes Toward Disabled Persons (SADP) was mailed or handed out to a total sample to 200 subjects. Usable responses were obtained from 52 subjects for a response rate of 22 percent from the German participants and 30 percent from the United States participants, yielding an overall response rate of 26 percent. Subjects were asked to respond with demographic characteristics on the questionnaire. Age, gender, and country of residence were requested in multiple choice format, yielding data at the nominal scale of measurement. Tables 1, 2, and 3 below report how many and the percent of the total sample for the items.

Table 1

Gender of Participants		
	Frequency	Percent
Male	28	53.8
Female	24	46.2
Total	52	100

Table 2

Age of Participants		
	Frequency	Percent
under 20	0	0
20-29	4	7.7
30-39	14	26.9
40-49	20	38.5
50-59	10	19.2
60-69	4	7.7
70+	0	0
Total	52	100

Table 3

Nationality of Participants		
	Frequency	Percent
United States	30	57.7

Germany	22	42.3
Total	52	100

Twenty-four items in the questionnaire requested ratings of agreement to statements about people with disabilities. These items were scored on a six-point Likert scale, creating data at the interval scale of measurement. According to the authors of the SADP, half the items in the questionnaire are worded so that a positive response (+3, +2, or +1) represents a favorable attitude and half the items in the questionnaire are worded so that a negative response (-3, -2, or -1) represents a favorable attitude (Antonak & Hanoach, 1988). In order to score the SADP, the sign of the response must be reversed for the items which are worded negatively. The sum of the 24 responses for each participant is then calculated and a constant of 72 is added to the total to eliminate negative scores. The scores shown in this report will be represented in their final state. The final scores can range from 0 to 144, with a higher score indicating a more favorable attitude toward people with disabilities. Table 4 reports means (M) and standard deviations (SD) for the ratings of agreement for each statement on the questionnaire. An average response of +3 is equal to the most favorable attitude toward people with disabilities in regard to that specific area. The larger the standard deviation, the greater the difference in attitude within the group.

Table 4

Item Analysis of the Revised SADP by Nationality and Gender

<u>Nationality</u>	<u>German</u>	<u>United States</u>
	<u>Gender</u>	

Item	Female		Male		Female	Male		Female	Male
	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>	<u>SD</u>
1. Free Public Education	2.4	0.5	2.4	0.7	1.7	1.9	1.3	2.3	
2. Accident Prone	0	2.3	-0.1	1.9	0.1	1.9	0.9	2.1	
3. Moral Decisions	2.9	0.4	1.7	1.9	2.4	0.8	2.2	1.7	
4. Having Children	2	1.4	1.4	1.5	1.3	2.4	2.2	1.7	
5. Live Where and How	1.1	2.6	1.7	1.7	0.5	2.4	2.4	1.2	
6. Housing	-0.1	1.9	0.9	2.3	0.5	1.9	1.4	1.9	
7. Rehabilitation	2.1	1.1	1.7	1.1	1.7	1.3	1.5	1.3	
8. Like Children	0.6	2.5	0.9	2.1	1.1	1.9	2.2	1.1	
9. Criminal Tendencies	3	0	2.2	1.2	2	0	1.9	1.2	
10. Institution	2	2.2	2.7	0.6	2.1	1.1	2.2	1.2	
11. Willing to Work	1.3	1.7	1.9	1.1	1.7	1.7	2.1	1.1	
12. Adjust	2.7	0.5	2.5	0.7	2.1	0.5	2.4	0.7	
13. Driver's License	0.4	2.4	-0.5	2.2	0.9	1.9	0.8	2	
14. Live with Others	0	2.4	0.5	2	1.3	1.5	1.5	1.8	
15. Zoning Ordinance	2	1.4	1.9	1.8	2.1	1.1	0.5	2.1	
16. Gainful Employment	2	2.2	2.3	1.6	2.4	0.9	2.5	0.7	
17. Adverse Effect	3	0.8	1.2	1.9	1.4	2	1.3	1.7	
18. Simple Repetition	1.4	1.8	1.3	1.6	0.9	1.5	1.9	1.2	
19. Deviant Personality	2.3	1.5	1.3	1.5	2.2	1.1	2.5	0.8	
20. Equal Employment	1.3	2.5	1.6	1.6	1.7	1.9	2.2	0.8	
21. Laws	2.9	0.4	2.5	0.7	1.7	1.8	1.5	1.6	
22. Bizarre Behavior	2.7	0.5	2.1	1.2	2.1	1.4	2.6	0.7	
23. Minimum Wage	1	2.7	1.9	1.5	2.3	0.8	2.3	0.8	
24. Competitive Society	1	2.2	-0.9	1.8	1.5	1.3	1.9	1.3	

Both males and females in Germany demonstrated a more favorable attitude toward a free public education for children with disabilities than that of their American counterparts. The participants from the United States had a less favorable average attitude, but also had greater differences in their answers. In a related statement, the female participants from Germany had an average score of +3 with a standard deviation of 0.8 regarding children with disabilities having an adverse effect on children without disabilities in the classroom. The male participants from Germany had a less favorable attitude toward this subject, with an average score of 1.2 and a standard deviation of 1.9. The participants from the United States had similar scores to that of the German male

participants regarding the effect children with disabilities participating in a regular education classroom.

Another area of notable differences in attitudes is toward the opportunity for people with disabilities to engage in gainful employment. While the scores for the participants from Germany are only slightly lower than those of the participants from the United States, the differences in responses is much greater indicating some level of uncertainty in that area. A difference can also be seen in attitudes toward legislation preventing employers from discriminating against people with disabilities. Although both countries have enacted laws prohibiting discrimination solely for the reason of disability, the males and females from the United States had much lower average scores (1.5 and 1.7 respectively) than those of the males and females from Germany (2.5 and 2.9 respectively), indicating the participants from the United States had a less approving attitude concerning this type of legislation.

An unanticipated outcome of this study reveals that the males in both the United States and Germany have a more favorable attitude than their female counterparts toward people with disabilities having equal opportunities for employment. Another unexpected outcome was the negative average responses from the participants from Germany regarding people with disabilities obtaining a driver's license. The participants from the United States scored higher, but showed only a slightly more favorable attitude. The male and female participants from the United States responded more favorably toward the behaviors of people with disabilities. The participants from Germany were in greater agreement that people with disabilities are in many ways like children. As a group, the female participants from Germany had the greatest differences in their individual

responses, while the males from Germany had the greatest number of negative average responses.

Table 5 examines age in relationship to average resultant scores of the revised SADP for respondents from the United States and Germany. In some cases, an average score or standard deviation could not be calculated because $n \leq 1$.

Table 5

Average Resultant Scores of the Revised SADP by Age Groups

Age Range	Nationality			
	Gender	German		United States
		Female	Male	Female Male
20-29	<u>M</u>	N/A	106	136 134
	<u>SD</u>	N/A	28.3	N/A N/A
30-39	<u>M</u>	98.3	109.3	115.2 113
	<u>SD</u>	7.6	11	17.8 35
40-49	<u>M</u>	122.5	103.2	110.3 109.5
	<u>SD</u>	12	7.4	14.7 6
50-59	<u>M</u>	121	110.5	95 120.25
	<u>SD</u>	18.3	21.9	25.45 14.1
60-69	<u>M</u>	N/A	96	91.5 119
	<u>SD</u>	N/A	N/A	24.7 N/A

Age did not appear to have a significant impact on the scores of the participants in Germany. There did appear to be a general trend, however, with the scores from the participants in the United States. As age decreased, many of the scores increased, indicating a more favorable attitude toward people with disabilities with the younger respondents. Since $n \leq 7$ in all age ranges, this trend may not generalize to all employers in the United States.

Table 6 shows the average resultant scores as well as standard deviations for males and females from both countries. The possible range of scores is 0 to 144.

Table 6

Average Resultant Scores of the Revised SADP by Nationality and Gender

Gender	German			United States		
	<u>M</u>	<u>SD</u>	<u>n</u>	<u>M</u>	<u>SD</u>	<u>n</u>
Males	105.3	12.2	15	116.2	17.7	13
Females	111.7	16	7	109.2	19	17

The males from the United States showed the most favorable overall attitude toward people with disabilities, with an average resultant score of 116.2, while the males from Germany showed the least favorable overall attitudes, with an average resultant score of 105.3. The female participants from the United States were the greatest number of respondents, where n=17.

The resultant scores from all participants ranged from 73 to 139, with a mean of 110.2 and a standard deviation of 16.6. This indicates that the employers survey had an overall relatively positive attitude toward people with disabilities. Although responses to the statements on the survey differed from participant to participant, few responses were rated with the answer corresponding to the least favorable attitude toward people with disabilities.

Chapter V

Conclusions

The results of this study indicated several noteworthy findings. The German participants showed a much more favorable attitude toward a free public education for people with disabilities than that of their American counterparts. On a related item, the participants from the United States agreed that children with disabilities may have a greater adverse affect on other children in a regular education classroom. It is difficult to speculate why the German employers who participated in this study may have a more favorable attitude toward the education of people with disabilities.

People with disabilities obtaining a driver's license was not looked upon favorably by the German employers participating in this study, with German males having the least favorable attitude concerning this subject. The female employers surveyed from the United States had the most favorable attitude toward people with disabilities obtaining a driver's license. The German employers participating in this study also had a less favorable attitude than the employers from the United States regarding people with disabilities living with others with similar disabilities.

The employers from both Germany and the United States showed less approving attitudes toward housing for people with disabilities. Many responded that housing for people with disabilities may be too expensive or too difficult to build. Although the average scores for this item were low, ranging from -0.1 to 1.4, the standard deviations were high indicating great differences in the responses for that item.

This study also revealed that the German employers that participated in the study had a more favorable attitude concerning legislation preventing employers from discriminating against people with disabilities. In the United States, the Americans with Disabilities Act of 1990 was enacted to prohibit discrimination against people with

disabilities in any employment practice. Satcher and Hendren (1992) stated that “knowing employers’ agreement with the ADA and identifying employer characteristics predictive of their agreement may help rehabilitation counselors and persons with disabilities develop cooperative, facilitative relationships with employers” (p. 13). This will enable more successful employment outcomes for individuals with disabilities. These results may also indicate that more extensive efforts must be made to educate employers about this legislation. Rehabilitation professionals can assist in promoting public awareness of the ADA and its provisions by working with television and radio stations, local chambers of commerce, city and local governments, newspapers, and by developing informational packages describing the ADA for distribution to employers (Satcher & Hendren, 1992).

Overall, the average attitude toward people with disabilities was at least somewhat favorable. The data also showed areas of concern in both countries, including the opportunity for people with disabilities to participate in competitive society and their ability to live with others. Other areas in which employers had less favorable attitudes included the behavior of individuals with disabilities, indicating employers may believe that people with disabilities may act like children or may be more prone to accidents. These myths need to be addressed by rehabilitation professionals, in order to allow people with disabilities to have a more equal opportunity to employment as well as other activities.

The results of this study also showed a great deal of differences in the responses to the statements made by employers. For this reason, it would be beneficial to the rehabilitation field to do further investigations on this subject, possibly with larger

sample sizes. Understanding the attitudes of employers toward people with disabilities is critical in the profession of rehabilitation due to the responsibility to both the employment community as well as people with disabilities.

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I understand that my participation in this study is strictly voluntary and I may discontinue my participation at any time without any prejudice. I understand that the purpose of this study is to investigate attitudes of employers toward people with disabilities. I further understand that any information about me that is collected during this study will be held in the strictest confidence and will not be part of my permanent record. I understand that at the conclusion of this study all records which identify individual participants will be destroyed. I understand that by returning this questionnaire, I am giving my informed consent as a participating volunteer in this study.

NOTE: Questions or concerns about participation in the research or subsequent complaints should be addressed first to the researcher or research advisor and second to Dr. Ted Knous, Chair, UW-Stout Institutional Review Board for the Protection of Human

Subjects in Research, 11 HH, UW-Stout, Menomonie, WI, USA 54751, phone (715) 232-1126.

AGE: under 20 _____
20-29 _____
30-39 _____
40-49 _____
50-59 _____
60-69 _____
70 + _____

GENDER:
female _____
male _____

COUNTRY OF RESIDENCE:

United States _____

Germany _____

Directions:

The statements presented below express opinions or ideas about people with disabilities. There are many differences of opinion; Many people agree and many people disagree with each statement. We would like to know your opinion about them. Put an "X" through the appropriate number. There are no right or wrong answers. You should work as quickly as you can, but don't rush. There is no time limit. Please respond to every statement.

Key

-3: I disagree very much

+1: I agree a little

-2: I disagree pretty much
-1: I disagree a little

+2: I agree pretty much
+3: I agree very much

- | | |
|--|-------------------|
| 1. Children with disabilities should not be provided with a free public education. | -3 -2 -1 +1 +2 +3 |
| 2. People with disabilities are not more accident prone than other people. | -3 -2 -1 +1 +2 +3 |
| 3. An individual with a disability is not capable of making moral decisions. | -3 -2 -1 +1 +2 +3 |
| 4. People with disabilities should be prevented from having children. | -3 -2 -1 +1 +2 +3 |
| 5. People with disabilities should be allowed to live where and how they choose. | -3 -2 -1 +1 +2 +3 |
| 6. Adequate housing for people with disabilities is neither too expensive nor too difficult to build. | -3 -2 -1 +1 +2 +3 |
| 7. Rehabilitation programs for people with disabilities are too expensive to operate. | -3 -2 -1 +1 +2 +3 |
| 8. People with disabilities are in many ways like children. | -3 -2 -1 +1 +2 +3 |
| 9. People with disabilities need only the proper environment and opportunity to develop and express criminal tendencies. | -3 -2 -1 +1 +2 +3 |
| 10. Adults with disabilities should be involuntarily committed to an institution following arrest. | -3 -2 -1 +1 +2 +3 |
| 11. Most people with disabilities are willing to work. | -3 -2 -1 +1 +2 +3 |
| 12. Individuals with disabilities are able to adjust to a life outside an institutional setting. | -3 -2 -1 +1 +2 +3 |
| 13. People with disabilities should not be prohibited from obtaining a driver's license. | -3 -2 -1 +1 +2 +3 |
| 14. People with disabilities should live with others of similar disability. | -3 -2 -1 +1 +2 +3 |
| 15. Zoning ordinances should not discriminate against disabled people by prohibiting group homes in | -3 -2 -1 +1 +2 +3 |

residential districts.

- | | |
|--|-------------------|
| 16. The opportunity for gainful employment should be provided to disabled people. | -3 -2 -1 +1 +2 +3 |
| 17. Children with disabilities in regular classrooms have an adverse effect on other children. | -3 -2 -1 +1 +2 +3 |
| 18. Simple repetitive work is appropriate for people with disabilities. | -3 -2 -1 +1 +2 +3 |
| 19. People with disabilities show a deviant personality profile. | -3 -2 -1 +1 +2 +3 |
| 20. Equal employment opportunities should be available to individuals with disabilities. | -3 -2 -1 +1 +2 +3 |
| 21. Laws to prevent employers from discriminating against people with disabilities should be passed. | -3 -2 -1 +1 +2 +3 |
| 22. People with disabilities engage in bizarre and deviant sexual behavior. | -3 -2 -1 +1 +2 +3 |
| 23. Workers with disabilities should receive at least the minimum wage established for their jobs. | -3 -2 -1 +1 +2 +3 |
| 24. Individuals with disabilities can be expected to fit into competitive society. | -3 -2 -1 +1 +2 +3 |

Ich verstehe, daß der Zweck dieser Studie die Untersuchung der Einstellungen von Arbeitgebern gegenüber Menschen mit Behinderung. Ich versichere weiterhin daß jegliche Informationen, die ich während der Studie sammle, streng vertraulich behandelt werden und nicht Teil meiner Aufzeichnungen die individuelle Teilnehmer identifizieren könnten, vernichtet werden. Ich verstehe, daß ich durch die Rückgabe dieser Umfarge Teilnehmer des Studie werde.

Anmerkung: Fragen oder Bedenken über die Teilnahme an dieses Studie oder nachfolgende Beschwerden senden Sie bitte an Dr. Ted Knous, Chair, UW-Stout, Menomonee, WI, USA 54751, Telefon (715) 232-1126.

ALTER:

unter 20 _____
20-29 _____
30-39 _____
40-49 _____
50-59 _____
60-69 _____
70 + _____

GENUS:

weiblich _____
männlich _____

LAND DES WOHSITZES:

USA _____
Deutschland _____

Benutzungshinweise:

Die folgenden Aussagen stellen Meinungen oder Einstellungen gegenüber Menschen mit Behinderungen dar. Es gibt viele unterschiedliche Meinungen; Viele stimmen den Aussagen zu, viele stimmen nicht zu. Wir möchten Ihre Meinung wissen. Kreuzen Sie die zuhelfende Nummer mit einem "X" an. Es gibt keine richtigen oder falschen Antworten. Sie sollten die Fragen so schnell möglich beantworten. Nehmen Sie sich dennoch genug Zeit. Es gibt keine zeitliche Begrenzung. Antworten Sie bitte auf jede Frage.

Aufschlüsselung

-3: ich stimme überhaupt nicht zu
-2: ich stimme nicht zu

+ 1: ich stimme nur ein bisschen zu
+ 2: ich stimme zu

-1 :ich bin nicht sicher

+ 3: ich bin unbedingt Meinung

- | | |
|--|-------------------|
| 1. Kinder mit Behinderungen sollten nicht mit freier öffentlicher Erziehung versorgt werden. | -3 -2 -1 +1 +2 +3 |
| 2. Menschen mit Behinderungen sind nicht anfällig für mehr Unfälle als normale Menschen. | -3 -2 -1 +1 +2 +3 |
| 3. Ein Individuum mit einer Behinderung is nicht fähig moralische Entscheidungen zutreffen. | -3 -2 -1 +1 +2 +3 |
| 4. Menschen mit Behinderungen sollten keine Kinder haben. | -3 -2 -1 +1 +2 +3 |
| 5. Menschen mit Behinderungen sollten die Möglichkeit haben, zu leben wie und wo sie wollen. | -3 -2 -1 +1 +2 +3 |
| 6. Angemessene Behausungen für Menschen mit Behinderung sind wederr zu teuer, noch schwierig zu bauen. | -3 -2 -1 +1 +2 +3 |
| 7. Rehabilitations Programmfür Menschen mit Behinderung sind zu teuer. | -3 -2 -1 +1 +2 +3 |
| 8. Menschen mit Behinderungen sind auf vielen Weisen wie Kinder. | -3 -2 -1 +1 +2 +3 |
| 9. Menschen mit Behinderungen brauchen nur die richtige Umgebung und Möglichkeiten um kriminell zu werden. | -3 -2 -1 +1 +2 +3 |
| 10. Menschen mit Behinderungen sollen in geschlossene Austelten eingewissen werden. | -3 -2 -1 +1 +2 +3 |
| 11. Die meistenMenschen mit Behinderungsind bereit zu arbeiten. | -3 -2 -1 +1 +2 +3 |
| 12. Menschen mit Behinderungen sid in der Lage auch außerhalb einer Anstalt zuleben. | -3 -2 -1 +1 +2 +3 |
| 13. Menschen mit Behinderungen sollten es nicht gestattet werden einer Anstalt zuleben. | -3 -2 -1 +1 +2 +3 |
| 14. Menschen mit Behinderungen sollten mit anderen zusammen leben, die ähnliche Behinderungen leben. | -3 -2 -1 +1 +2 +3 |

15. Geinderten Verordnunge sollten Behindertenheime in Wohnbezirken nicht verhindern	-3 -2 -1 +1 +2 +3
16. Menschen mit Behinderungen sollten die Möglichkeit für sinnvolle Arbeiterhalten.	-3 -2 -1 +1 +2 +3
17. Kinder mit Behinderungen in regulären Klassenzimmern haben eine ungünstige Wirkung auf Anderen Kindern.	-3 -2 -1 +1 +2 +3
18. Einfache sich wiederholende Arbeit ist passend für Meschen mit Behinderungen.	-3 -2 -1 +1 +2 +3
19. Menschen mit Behinderungen zeigen ein abwegiges Persönlichkeithprofit.	-3 -2 -1 +1 +2 +3
20. Gleiche Anstellung möglichkeiten sollten für Menschen mit Behinderungen zu Verfügung zu stehen.	-3 -2 -1 +1 +2 +3
21. Gesetze, die Arbeitgeber von Diskriminierung gegenüber Menschen mit Behinderungen abhalten sollten verabschiehet werden.	-3 -2 -1 +1 +2 +3
22. Menschen mit Behinderungen neigen dazu abwegien und bizzare sexuelle Vorlieben zu haben.	-3 -2 -1 +1 +2 +3
23. Arbeiter mit Behinderungen soolten zumindest das Minimalhehalt für ihre Arbeitbekommen	-3 -2 -1 +1 +2 +3
24. Von Individuen mit Behinderungen kann erwartet werden, dass sie in der Wettbewerbgesellschass zurecht kommen.	-3 -2 -1 +1 +2 +3